

NATIONAL SECURITY COUNCIL

WASHINGTON

7 June 1948

Mr. Mathias F. Correa  
Cahill, Gordon, Zachary and Reindel  
63 Wall Street  
New York, New York

Dear Mat:

Enclosed please find copy of "Notification of Personnel Action". Also, enclosed is copy of your travel order for the month of June.

Sincerely,

  
Robert Blum

Enclosures - 2

Approved For Release 2003/05/27 : CIA-RDP86B00269R000500050092-0

NATIONAL SECURITY COUNCIL

NOTIFICATION OF PERSONNEL ACTION.

MM:alm

1. NAME (MR.—MISS—MRS. FIRST- MIDDLE INITIAL LAST) <b>Mr. Mathias F. Correa</b>				2. DATE OF BIRTH <b>3/4/1910</b>		3. JOURNAL OR ACTION No.		4. DATE <b>14 April 1948</b>	
This is to notify you of the following action affecting your employment:									
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Excepted Appointment (Correction)*</b>				6. EFFECTIVE DATE <b>13 Feb. 1948</b>		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Schedule A-45</b>			
				8. POSITION TITLE <b>Consultant</b>		9. SERVICE, GRADE, SALARY <b>WAE \$35.00 per diem</b>			
				10. ORGANIZATIONAL DESIGNATIONS <b>National Security Council</b>		11. HEADQUARTERS <b>Washington, D. C.</b>			
				12. FIELD OR DEPT'L		13. REMARKS			
				14. SIGNATURE OR OTHER AUTHENTICATION		15. VETERAN'S PREFERENCE			
				16. POSITION CLASSIFICATION ACTION		17. SEX			
18. RACE				19. APPROPRIATION		20. SUBJECT TO C. S. RETIREMENT ACT (YES/NO)		21. DATE OF OATH (EXCEPTIONS ONLY)	
22. LEGAL RESIDENCE				23. FROM:		24. TO:		25. 1185200 108	

No-Strike Affidavit has been properly executed.

\*Correction of Action dated 13 February 1948 to show correct salary as \$35.00 per diem previously shown as \$35.00 per annum.

STAT

WILLIAM J. KELLY  
Acting Chief, Personnel Branch

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1. EMPLOYEE COPY

FORM NO. 34-4 <b>Approved For Release 2003/05/27 : CIA-RDP86B00269R000500050092-0</b> APR 1948		NUMBER <b>NR 703-48</b> DATE <b>26 May 1948</b>		
<b>TRAVEL ORDER</b>				
NAME <b>Mathias F. Corrao</b>	TITLE <b>Intermittent Consultant</b>			
OFFICE OR BRANCH <b>National Security Council</b>	OFFICIAL STATION <b>Washington, D. C.</b>			
You are hereby authorized to travel and incur necessary expenses in accordance with Standardized Government Travel Regulations and <b>applicable provisions of Public Law 600-79th Congress and regulations issued thereunder</b> , subject to the following limitations:				
<b>ITINERARY:</b>  <p style="text-align: center;"><b>New York, N. Y. to Washington, D. C. and return as often as may be necessary.</b></p>				
<b>PURPOSE:</b> <p style="text-align: center;"><b>Official business - TDX</b></p>				
Date effective, or as soon thereafter as practicable: <p style="text-align: center;"><b>1 June 1948</b></p>	Terminating approximately: <p style="text-align: center;"><b>30 June 1948</b></p>			
MODE OF TRAVEL AUTHORIZED AS CHECKED BELOW:				
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Common Carrier  <input checked="" type="checkbox"/> Airplane  <input type="checkbox"/> Vessel  <input type="checkbox"/> Privately Owned Automobile           </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Government Transportation  <input type="checkbox"/> Airplane  <input type="checkbox"/> Vessel  <input type="checkbox"/> Motor Vehicle           </td> </tr> </table>			<input checked="" type="checkbox"/> Common Carrier <input checked="" type="checkbox"/> Airplane <input type="checkbox"/> Vessel <input type="checkbox"/> Privately Owned Automobile	<input type="checkbox"/> Government Transportation <input type="checkbox"/> Airplane <input type="checkbox"/> Vessel <input type="checkbox"/> Motor Vehicle
<input checked="" type="checkbox"/> Common Carrier <input checked="" type="checkbox"/> Airplane <input type="checkbox"/> Vessel <input type="checkbox"/> Privately Owned Automobile	<input type="checkbox"/> Government Transportation <input type="checkbox"/> Airplane <input type="checkbox"/> Vessel <input type="checkbox"/> Motor Vehicle			
*ALLOWANCE FOR PRIVATELY OWNED AUTOMOBILE AS FOLLOWS:				
<input type="checkbox"/> (a) _____ cents per mile not to exceed cost by common carrier. <input type="checkbox"/> (b) _____ cents per mile, as being more advantageous to the Government.				
<input type="checkbox"/> The change of official station indicated is effected in the interest of the Government and not for your personal convenience. <input type="checkbox"/> In connection with change of station, you are authorized to transport your immediate family and your household goods and personal effects, subject to weight limits, restrictions and provisions of PL 600 and Executive Order 9805. <input type="checkbox"/> Travel to first post of duty abroad including expenses of transportation of immediate family, household goods and personal effects in accordance with the provisions of Sec. 7, PL 600. <input type="checkbox"/> Return from post of duty abroad including expenses of transportation of immediate family, household goods and personal effects in accordance with the provisions of Sec. 7, PL 600.				
<b>SPECIAL AUTHORITY:</b>				
<b>PER DIEM AUTHORIZED:</b>  <p style="text-align: center;"><b>Per diem allowance: \$6.00 (while employed on an intermittent basis)</b></p>				
<input type="checkbox"/> Security Clearance approved: <input type="checkbox"/> Physical examination completed; immunization to be completed approx. _____				
APPROPRIATION LIMITATION <b>1185200 Salaries &amp; Expenses, NSC</b>	SIGNATURE			
ALLOTMENT ACCOUNT SYMBOL				